Medically Appropriate Treatment Options for Opioid Addiction Status Report

(FY2022 Appropriation Act - Public Act 87 of 2020)

October 1, 2021

Sec. 1151. (1) The department shall coordinate with the department of licensing and regulatory affairs, the department of the attorney general, all appropriate law enforcement agencies, and the Medicaid health plans to work with local substance use disorder agencies and addiction treatment providers to help inform Medicaid beneficiaries of all medically appropriate treatment options for opioid addiction when their treating physician stops prescribing prescription opioid medication for pain, and to address other appropriate recommendations of the prescription drug and opioid abuse task force outlined in its report of October 2015.

(2) By October 1 of the current fiscal year, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on how the department is working with local substance use disorder agencies and addiction treatment providers to ensure that Medicaid beneficiaries are informed of all available and medically appropriate treatment options for opioid addiction when their treating physician stops prescribing prescription opioid medication for pain, and to address other appropriate recommendations of the task force. The report shall include any potential barriers to medication-assisted treatment, as recommended by the Michigan medication-assisted treatment guidelines, for Medicaid beneficiaries in both office-based opioid treatment and opioid treatment program facility settings.



Executive Summary

Michigan Department of Health and Human Services (MDHHS) coordinates with state agencies, Medicaid health plans, and other stakeholders to leverage funding resources and promote the use of medication assisted treatment (MAT) to treat opioid use disorder (OUD). In 2019, MDHHS established the Michigan Opioids Task Force focused on developing and implementing the state of Michigan's response to the opioid epidemic. MDHHS provides strategic and administrative support coordinating federal discretionary grants to support prevention, recovery, treatment, and harm reduction services statewide.

MDHHS is promoting MAT through our Medicaid program and Substance Abuse and Mental Health Services (SAMHSA) Substance Abuse Block Grant. In addition, MDHHS is promoting MAT initiatives funded by the State Opioid Response (SOR) grants and State Opioid Response 2020 (SOR 2020) grant. MDHHS is also promoting MAT through public awareness campaigns. MDHHS is working with non-profits to standup MAT initiation in hospitals across the state. Finally, MDHHS is working to increase access to MAT in jail and prison settings as well as improve care coordination for individuals' post-incarceration.

Coordination

Addressing the opioid crisis requires a multi-faceted approach. MDHHS is working with other state agencies to meet and address these goals by leading the Michigan Opioids Task Force, facilitating a stakeholder workgroup on prescription drug overdose prevention, and providing grant coordination. The efforts help the state of Michigan develop a coordinated response to address opioid misuse, including the promotion of MAT.

Michigan Opioid Task Force: MDHHS leads the new Opioids Task Force with the Department of Licensing and Regulatory Affairs (LARA), Michigan State Police (MSP), Department of Labor and Economic Opportunity (LEO), Department of Environment, Great Lakes, and Energy (EGLE), Department

of Insurance and Financial Services (DIFS), Michigan Department of Education (MDE), and the Attorney General's office. MDHHS led the effort to develop a statewide opioid strategic plan across state government departments. This strategic plan was developed in partnership with the state agencies serving on the Task Force. In addition, a stakeholder advisory group was established to help guide the effort of the Opioids Task Force.

Michigan Overdose Data to Action Workgroup: MDHHS formed a Michigan Overdose Data to Action workgroup. This workgroup is made of stakeholders from across the state representing healthcare, law enforcement, non-profits, individuals with lived experience and other community partners. This workgroup will develop a Michigan action plan by utilizing opioid surveillance data and data systems to coordinate and identify objectives and strategies to address opioid use and overdoses through a health equity lens. MDHHS continues to work with stakeholders and other state departments on this effort.

Grants coordination: Since 2018, MDHHS has been awarded key federal discretionary grants to fund prevention, recovery, treatment, and harm reduction services. In 2018, MDHHS received a 2-year grant called the State Opioid Response (SOR) grant. In total, SOR provides \$28 million in funding per year. In 2020, MDHHS received an additional 2-year grant called the State Opioid Response 2020 (SOR 2020) grant. In total SOR 2020, provides \$36 million in funding per year. Both grants are used for prevention, treatment, and recovery activities across the state. SOR 2020 funding has led to expansion of work funded by the SOR grant.

Both grants invest in additional training for physicians treating opioid use disorder, including the development of best practices for opioid prescribing in acute care settings, access to no-cost DATA 2000 waiver to provide buprenorphine trainings, and one-on-one consultations to medical professionals treating Stimulant Use Disorder (SUD) with medication assisted treatment.

Key investments have been made to support innovative SUD/OUD treatment practices. For example, Prepaid Inpatient Health Plans (PIHP) partners are partnering with hospital administrations to integrate Peer Support Services in emergency-department based settings. SOR funds have stood up a comprehensive care model for individuals entering and leaving select jail and prison settings, the MISSION MI-REP program, and have supported local jails to standing up jail-based MAT for individuals in justice settings. Grants also support telehealth services for MAT in rural counties through a partnership with the Michigan Opioid Collaborative at the University of Michigan. SOR also funds mobile care units to remove patient barriers to access to care and provide access to essential harm reduction services. In addition, SOR is funding the expansion of MSP Angels and Families Against Narcotics (FAN) Hope Not Handcuffs (HNH) program that helps connect people to treatment.

In 2019, MDHHS received a grant from the Centers for Disease Control (CDC) focused on providing real-time actionable data on the drug overdose crisis entitled the Michigan Overdose Data to Action (MODA) grant. This grant provides MDHHS over \$7 million a year for three years for opioid prevention and surveillance activities. This will continue funding activities from other CDC grants and build new programs to improve prevention and surveillance. The MODA grant launched the public-facing data dashboard that features key surveillance metrics in real-time that supports local on the ground efforts to fight the opioid epidemic. These activities will include continuing to partner with LARA on Michigan Automated Prescription System (MAPS) provider education, data dissemination and systems improvements.

Promoting Medication Assisted Treatment (MAT)

MDHHS is committed to promoting the use of MAT as a necessary and effective treatment strategy for opioid addiction. MDHHS is promoting MAT by increasing funding and access to programs through Medicaid funding, SAMHSA block grants, and other grants. MDHHS funds three types of MAT, methadone, buprenorphine, and naltrexone. In addition, significant funding in the SOR, and SOR 2020 grants goes to expansion of MAT services.

Below are tables offering more information on SOR and SOR 2020 treatment initiatives.

SOR Treatment Initiative	Agency Responsible
Peers in FQHC's, Urgent Care, and Outpatient Settings: This project	Prepaid Inpatient Health Plans
will serve to implement peer recovery coaching services in	(PIHPs)
outpatient settings such as FQHC's or Urgent Care.	
Mobile Care Units: These units will bring counseling/therapy and	PIHPs
physical health services to OUD patients. The units will be	
retrofitted vans/buses with at least one private room for counseling	
and an area for intake/scheduling. There is the potential to have a	
bathroom incorporated for urine screening. Harm reduction	
activities (naloxone) will also be incorporated.	
PIHP Treatment - OUD Treatment Costs: This funding is awarded	PIHPs
specifically to cover the costs of uninsured/under-insured patients	
for OUD treatment services. Patients receiving these services must	
have data collected relevant to the Government Performance	
Results Act (GPRA). Treatments will need to be defined and	
reported on.	
Jail Based MAT Expansion: This funding will serve to expand the	PIHPs
development of jail-based MAT (Medication Assisted Treatment)	
programs.	
Prison MAT Pilots	Michigan Department of
Carson City Correctional Facility (DRF)	Corrections
Central Michigan Correctional Facility (STF)	
Charles Egeler Reception & Guidance Center (RGC)	
Women's Huron Valley Correctional Facility (WHV)	
Telehealth to Support Medication-Assisted Therapies in Rural	University of Michigan
Michigan	
MOC will conduct a telehealth needs assessment, establish nurse	
care-manager led care coordination, offer telehealth-based	
psychotherapy to clients and tele-mentoring to MAT providers, and	
create a dissemination toolkit.	
MISSION MI-REP	Wayne State University
Kent County	
Monroe County	
Wayne County	
Oakland County	

Macomb County	
*Detroit Re-Entry Center (DRC) programming transitioning to the	
Macomb Correctional Facility (MCF).	
Direct Provider Support for Medication Assisted Treatment (MAT)	Michigan Opioid Partnership
The Michigan Opioid Partnership (Community Foundation for	
Southeast Michigan) will create a grant-making program for	
hospitals to initiate culture change and MAT induction in	
emergency departments, with a warm handoff to an outpatient	
treatment provider.	
Hope Not Handcuffs Expansion	MPHI with Families Against
Hope Not Handcuffs Expansion	MPHI with Families Against Narcotics
Hope Not Handcuffs Expansion Angel Program Expansion	
·	Narcotics
Angel Program Expansion	Narcotics
Angel Program Expansion No Cost Extension funding will be allocated to hiring a part-time	Narcotics
Angel Program Expansion No Cost Extension funding will be allocated to hiring a part-time Angel coordinator in northern Michigan.	Narcotics Michigan State Police
Angel Program Expansion No Cost Extension funding will be allocated to hiring a part-time Angel coordinator in northern Michigan. Statewide Trainings for Treatment	Narcotics Michigan State Police Community Mental Health

SOR 2020Treatment Initiative	Agency Responsible
OUD/SUD Treatment Costs, Case Management, and	PIHPs
Transportation: This funding will support the cost of uninsured and	
underinsured individuals seeking treatment and case management	
services for Opioid Use Disorder (OUD) and Stimulant Use Disorder	
(SUD). PIHP's will also provide assistance to those needing	
transportation to treatment and recovery services.	
Peers in Emergency Departments, Outpatient Treatment, and	PIHPs
Community Settings: PIHP's will receive funding to support the use	
of peer recovery coaches in emergency departments, Federally	
Qualified Health Center's, outpatient treatment settings, and	
community organizations such as libraries and drop-in centers. Peer	
recovery coaches will engage clients and conduct Screening, Brief	
Intervention, and Referral to Treatment (SBIRT) for persons at risk	
for OUD and SUD.	
MAT Expansion: Funding will support the start-up costs for new	PIHPs
MAT providers in high need areas.	
Jail-based MAT Expansion: PIHP's will work to implement	PIHPs
medication assisted treatment (MAT) services in additional county	
jails and expand the capacity of jails currently offering MAT	
services.	
Mobile Care Units: PIHPs will be awarded funding to secure mobile	PIHPs
care units. These retrofitted vans/buses will bring	
counseling/therapy and collaborate on physical health services to	
OUD patients, as well as MAT or transportation to treatment in	

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areas of high need. Mobile care units will also distribute naloxone	
to individuals at risk of an overdose and provide telehealth services	
in rural areas with limited MAT availability.	
Opioid Health Home (OHH) Expansion: Modeled after Vermont's	PIHPs
·	FINES
Hub and Spoke initiative and following the OHH expansion under	
the SOR 1 grant, an OHH modeled program will be piloted in PIHP	
regions 6, 7, and 10. The OHH will provide comprehensive care	
management and coordination services to Medicaid beneficiaries	
with opioid use disorder. The OHH will function as the central point	
of contact for directing patient-centered care across the broader	
health care system.	
Community Diversion: Law enforcement and case managers	PIHPs
identify SUD cases to connect to treatment.	1 1111 3
·	DILIDa
Recovery Housing: PIHP's will receive funding to support recovery	PIHPs
housing stays for persons with OUD and SUD. Limited funds may	
also be used to support necessary repairs to recovery homes and	
the cost of certification through the Michigan Association for	
Recovery Residences.	
Contingency Management Incentives: PIHP's will work with OUD	PIHPs
treatment providers to support incentives for continuation in	
treatment across the publicly funded SUD system.	
At-Risk Screening in Pregnancy: Funding will support the expansion	MDHHS Public Health
of the High-Touch High-Tech (HT2) screening program to 8	WiDinis Fabile Health
obstetrician offices in high-risk areas across Michigan. HT2 is an app	
used in-office as well as in the community to promote engagement	
in treatment and provide information to the prenatal clinic on the	
patient's needs. It is tailored to the resources available in the	
region.	
Neonatal Abstinence Syndrome/Rooming in Project: A rooming in	MDHHS Public Health
initiative will be piloted in three Michigan hospitals that allows	
infants diagnosed with Neonatal Abstinence Syndrome (NAS) to	
stay in a private room with their mother, thereby avoiding lengthy	
Neonatal Intensive Care Unit stays and promoting early	
attachment.	
	NADIUIC Dublic Health
Drop-In/Engagement Center: A drop-in/engagement center will be	MDHHS Public Health
piloted to support connections to treatment and reduce emergency	
department services for intoxicated individuals impacted by OUD	
and SUD.	
MAT Expansion and Naloxone Support: ITC will expand outpatient	Inter-Tribal Council
and residential treatment services in federally recognized member	
tribes in Michigan. ITC will also train peers and first responders on	
recognition of opioid overdose and appropriate use of naloxone.	
Neonatal Abstinence Syndrome Support: ITC will strengthen the	Inter-Tribal Council
tribal capacity to respond to the opioid epidemic by providing	
support and services to mothers at risk for, or diagnosed with an	
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OUD, and their infants and young children, including families	
affected by neonatal abstinence syndrome (NAS).	

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Hope Not Handcuffs: MPHI will work with Families Against	Michigan Public Health
Narcotics to support the Hope Not Handcuffs (HNH) program in 12	Institute
counties. HNH is a program that allows any person struggling with	
an OUD to walk into a participating police station and ask for	
assistance in accessing treatment services. HNH Angels will connect	
the individual to services and provide peer recovery support.	
Angel Program: Funding will support the continuation of the Angel	Michigan State Police
Program, which provides assistance to persons who present at a	
state police post and ask for assistance in accessing OUD treatment	
services. Funding also supports naloxone training for state police	
and Angel volunteers.	Mishing Onicid Bouts suchia
MAT Expansion in Emergency Departments: The Michigan Opioid	Michigan Opioid Partnership
Partnership will expand upon efforts undertaken with SOR 1	
funding by creating a grant-making program for hospitals to begin	
piloting MAT initiation in emergency departments. The selected	
hospitals will work with local outpatient treatment providers to	
create a warm handoff mechanism upon client discharge from the	
ED. Physician champions will be granted funds to provide peer-to-	
peer support and technical assistance.	
Post Overdose Rapid Response: Post-overdose rapid response	Michigan Opioid Partnership
teams will be implemented in the community to support individuals	(MOP)
after overdose and provide a connection to treatment and	
supportive services.	
Certification of Recovery Residences: MARR will work to certify	Michigan Association of
recovery residences in Michigan according to National Association	Recovery Residences
of Recovery Residence standards.	Necovery Nesidefices
Peers in Parole and Probation Offices: MDOC will pilot a program	Michigan Department of
	Corrections
where peer recovery coaches are placed in parole/probation	Corrections
officers to educate the justice-involved population about OUD and	
assist individuals in accessing treatment services or other resources	
to aid them in their recovery.	
Michigan Opioid Collaborative (MOC): The Michigan Opioid	University of Michigan
Collaborative will work to improve access and treatment utilization	
for patients with OUD and other comorbid SUD's by training	
clinicians and providing peer education. MOC will also provide	
education regarding chronic Hepatitis C comorbidity and treatment	
and work to improve MAT access at the pharmacy level.	
Expansion of Treatment Courts and Training for Judicial System:	State Court Administrative
The State Court Administrative Office (SCAO) will support problem-	Office
solving courts in areas where need has outgrown capacity,	
implement the Sequential Intercept Model for treatment courts to	
better support needed services for individuals with OUD and SUD,	
and update the Michigan Judicial Institute (MJI) benchbooks to	
include opioid-specific material.	Moune State University
MISSION-CJ Michigan Re-Entry Project: MISSION-CJ is a	Wayne State University
wraparound support approach that combines a number of	
evidence-based practices designed to address the unique needs of	

justice-involved individuals with COD who are re-entering the	
community from jails and prisons. These services are delivered by a	
case manager and peer team and traditionally with in-person in	
reach followed by community-based support post release. The MI-	
REP model currently servicing individuals discharging to Wayne,	
Macomb, Oakland, and Kent counties will be expanded to provide	
for telehealth in-reach services for clients 3 months pre-release into	
the community.	
Opioid Treatment Ecosystem Expansion: Wayne State University	Wayne State University
Center for Behavioral Health and Justice will provide technical	
assistance to local county jails as they implement MAT	
programming and naloxone distribution for individuals who are	
currently incarcerated.	
Michigan Primary Care Association (MPCA) Mobile Care Unit: The	Michigan Primary Care
Michigan Primary Care Association will partner with Great Lakes	Association
Bay Health Center to implement a mobile care unit to offer MAT	
and SUD services.	

Supporting MAT in hospitals: MDHHS continues to work with non-profits and foundations across the state to address the opioid crisis and promote the use of MAT. MDHHS is promoting local and statewide strategies on our website, michigan.gov/opioids. MDHHS partnered with Blue Cross Blue Shield of Michigan, Blue Cross Blue Shield of Michigan Foundation, the Community Foundation for Southeast Michigan, the Ethel and James Flinn Foundation, The Jewish Fund, the Michigan Health Endowment Fund and the Superior Health Foundation to form the Michigan Opioid Partnership. The Michigan Opioid Partnership funds implementation of emergency department-based of MAT programs. In total, MOP has worked to stand up nineteen ED-based MAT programs across the state. MDHHS is continuing expanding this work statewide with the SOR 2020 grant.

Supporting MAT in justice settings: MDHHS is working with the Michigan Department of Corrections and county jails to increase use of MAT in prisons and jails. SOR and SOR 2 grant funding is being used to support this effort in partnership with Wayne State University Center for Behavioral Health and Justice According to MDHHS' annual survey of jails, 42 jails report providing MAT in 2021, up from 35 in 2020. Improving care for justice involved patients is one of the pillars of Michigan's strategy to reduce overdose deaths. In addition, MDHHS is working with law enforcement and community partners to promote diversion programs that connect opioid use disorder patients to treatment.

MDHHS Media Campaign: In 2020, MDHHS launched a media campaign aimed at promoting harm reduction services for people who use drugs. A key effort of harm reduction organizations is to provide treatment to people using drugs, if the individual desires. The call to action in this campaign directs the audience to our website, michigan.gov/opioids. One of the key points of this website is the importance of MAT. The website offers overview information on MAT and its different types and its important role in opioid treatment. In addition, the website provides links to more information including in depth information for prescribers and connects visitors to information on where to receive treatment services. There are over half a million page views on the website since its launch.